## BEST AVAILABLE CC.

| ٠                                                          | PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004 27 FEB 2007 |                                           |                |                                          |                              |    |                                   | Application or Docket Number                     |          |                                   |                        |
|------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------|----------------|------------------------------------------|------------------------------|----|-----------------------------------|--------------------------------------------------|----------|-----------------------------------|------------------------|
| CLAIMS AS FILED - PART I  SMALL ENT  (Column 1) (Column 2) |                                                                                     |                                           |                |                                          |                              |    |                                   | <u></u>                                          |          |                                   |                        |
| U.S. NATIONAL STAGE FEES                                   |                                                                                     |                                           |                |                                          |                              |    | RATE                              | FEE                                              | 7        | RATE                              | FEE                    |
| BASIC FEE                                                  |                                                                                     |                                           |                |                                          |                              |    | BASIC FEE                         | 150                                              | OR       | BASIC FEE                         |                        |
| EXAMINATION FEE                                            |                                                                                     |                                           |                |                                          |                              |    | EXAM. FEE                         | 100                                              |          | EXAM. FEE                         |                        |
| SEARCH FEE                                                 |                                                                                     |                                           |                |                                          |                              |    | SEARCH FEE                        | DOT                                              | 7        | SEARCH FEE                        | <del> </del>           |
| FEE FOR EXTRA SPEC. PGS.                                   |                                                                                     |                                           | n              | ninus 100 =                              | / 50 =                       |    | X \$ 125 =                        | JUC.                                             | 1        | X \$ 250 =                        | -                      |
| TOTAL CHARGEABLE CLAIMS                                    |                                                                                     |                                           | minus 20 = *   |                                          |                              |    | X \$ 25 =                         | <u> </u>                                         | OR       | X \$ 50 =                         | <del> </del>           |
| INDEPENDENT CLAIMS                                         |                                                                                     |                                           | 2              | minus 3 = *                              |                              |    | X \$ 100 =                        | <del>                                     </del> | OR       | X \$ 200 =                        |                        |
| MULTIPLE DEPENDENT CLAIM PRE                               |                                                                                     |                                           | ESENT          | ·l                                       |                              | 7  | + \$ 180 =                        |                                                  | OR       | + \$ 360 =                        |                        |
| * If                                                       | the difference                                                                      | in column 1 is                            | less than z    | ero, enter "0" i                         | in column 2                  |    | TOTAL                             | 45                                               | OR       | TOTAL                             | <u> </u>               |
| AMENDMENT A                                                | Total<br>Independent                                                                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | Minus<br>Minus | HIGHES<br>NUMBEI<br>PREVIOUS<br>PAID FO  | R PRESEI<br>SLY EXTRA<br>R = |    | X \$ 25 = X \$ 100 =              | ADDI-<br>TIONAL<br>FEE                           | OR<br>OR | X \$ 50 =<br>X \$ 200 =           | ADDI-<br>TIONAL<br>FEE |
|                                                            | FIRST PRES                                                                          | (Column 1)                                | IULTIPLE DE    | (Column                                  |                              | 2) | + \$ 180 =<br>TOTAL ADDIT.<br>FFF |                                                  | OR<br>OR | + \$ 360 =<br>TOTAL ADDIT.<br>FFF |                        |
| 봈                                                          |                                                                                     | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGHES<br>NUMBER<br>PREVIOUS<br>PAID FOR | R PRESEN                     |    | RATE                              | ADDI-<br>TIONAL<br>FEE                           |          | RATE                              | ADDI-<br>TIONAL<br>FEE |
|                                                            | Total .                                                                             | *                                         | Minus          | **                                       | =                            |    | X \$ 25 =                         |                                                  | OR       | X \$ 50 =                         |                        |
|                                                            | Independent                                                                         | *                                         | Minus          | ***                                      | =                            |    | X \$ 100 =                        |                                                  | OR       | X \$ 200 =                        |                        |
|                                                            | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |                                           |                |                                          |                              |    | + \$ 180 =                        |                                                  | OR       | + \$ 360 =                        |                        |
| *                                                          | if the onto in each                                                                 | mn 1 is less than the                     |                |                                          |                              |    | TOTAL ADDIT.<br>FFF               |                                                  | OR 1     | OTAL ADDIT.<br>FFF                |                        |

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.